

10297501 120502

Practitioner's Packet No.: 24717-718

PATENT

POWER OF ATTORNEY BY ASSIGNEE TO EXCLUSION OF INVENTOR
UNDER 37 C.F.R. § 3.71 WITH REVOCATION OF PRIOR POWERS

The undersigned ASSIGNEE of the entire interest in:

- ☐ U.S. Patent No. _____
☒ U.S. application no. 10/070,338, filed on February 27, 2002

hereby appoints the following attorneys of Wilson Sonsini Goodrich & Rosati:

Attorney Name	Reg. No.	Attorney Name	Reg. No.
Michael Barclay	<u>32,553</u>	Scott Morris	43,818
Michael Murphy	<u>37,404</u>	Shirley Chen	<u>44,608</u>
U.P. Peter Eng	<u>39,666</u>	Julie Holloway	<u>44,769</u>
Kenta Suzue	<u>45,145</u>	Kevin Sin	<u>43,110</u>
George Willman	<u>41,378</u>	Jonathan Manson	<u>43,774</u>

and all Wilson Sonsini Goodrich & Rosati attorneys registered to practice before the United States Patent and Trademark Office, to prosecute this application and transact all business in the United States Patent and Trademark Office in connection therewith and hereby revokes all prior powers of attorney; said appointment to be to the exclusion of the inventors and the inventors' attorneys in accordance with the provisions of 37 C.F.R. § 3.71.

The following evidentiary documents establish a chain of title from the original owner to the Assignee:

(complete one of the following)

- ☒ a copy of an Assignment attached hereto, which Assignment has been (or is herewith) forwarded to the Patent and Trademark Office for recording; or
- ☐ the Assignment recorded on ____ at reel ____, frames ____-____.

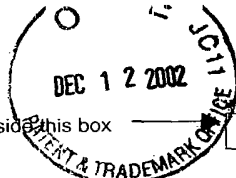
Pursuant to 37 C.F.R. § 3.73(b) the undersigned Assignee hereby states that evidentiary documents have been reviewed and hereby certifies that, to the best of ASSIGNEE's knowledge and belief, title is in the identified ASSIGNEE.

Direct all correspondence and telephone calls to:

Name	Kenta Suzue					
Address	Wilson Sonsini Goodrich and Rosati					
Address	650 Page Mill Road					
City	Palo Alto	State	CA	Zip	94304	Customer No.: 021971
Country	USA	Telephone	(650) 493-9300	Fax	(650) 493-6811	

ASSIGNEE: RouteScience Technologies, Inc.

Name: HERBERT MADAN
PrintHerbert Madan
SignatureTitle: CEODate: 11/25/02



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PTO/SB/01 (12-97)

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE


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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of the application is not designated in the prior United States or PCT international application in the manner provided by the first paragraph of 31 U.S.C. 112. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/US01/32476	10/17/2001	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number 021971 

OR

☐ Registered practitioner(s) name/registration number listed below

Place Customer
Number Bar
Code Label here

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

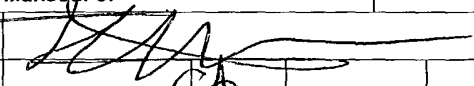
Direct all correspondence to: ☒ Customer Number
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021971OR ☐ Correspondence address below

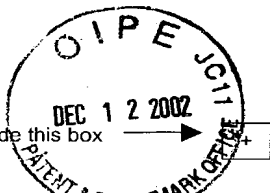
Name	Kenta Suzue						
Address	Wilson Sonsini Goodrich & Rosati						
Address	650 Page Mill Road						
City	Palo Alto	State	CA	ZIP	94304		
Country	U.S.	Telephone	650-493-9300		Fax	650-493-6811	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname					
Mansour J.		Karam					
Inventor's Signature						Date	11/25/02
Residence: City	Mountain View	State	CA	Country	US	Citizenship	Lebanon
Post Office Address	707 Continental Circle, #421, Mountain View, CA 94040						
Post Office Address							
City	Mountain View	State	CA	ZIP	94040	Country	US

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto:



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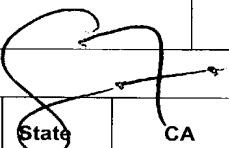
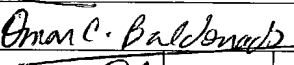
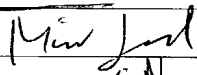
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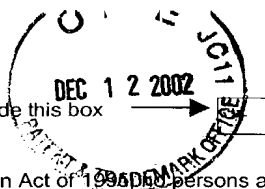
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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page 1 of 2

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))				Family Name or Surname				
Sean P.				Finn				
Inventor's Signature				Date		11.25.02		
Residence: City		Belmont	State	CA	Country	US	Citizenship	US
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Post Office Address								
City		Belmont	State	CA	ZIP	94002	Country	US
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))				Family Name or Surname				
Omar C.				Baldonado				
Inventor's Signature				Date		11/25/02		
City		Palo Alto	State	CA	Country	US	Citizenship	US
Post Office Address		700 Alester Avenue, Palo Alto, CA 94303						
Post Office Address								
City		Palo Alto	State	CA	ZIP	94303	Country	US
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))				Family Name or Surname				
Michael A.				Lloyd				
Inventor's Signature				Date		11/25/02		
City		San Carlos	State	CA	Country	US	Citizenship	US
Post Office Address		160 Arundel Road, San Carlos, CA 94070						
Post Office Address								
City		San Carlos	State	CA	ZIP	94070	Country	US

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)	Attorney Docket Number	24717-718
	First Named Inventor	Mansour J. Karam
	COMPLETE IF KNOWN	
	Application Number	10/070,338
	Filing Date	February 27, 2002
	Group Art Unit	Unassigned
Examiner Name	Unassigned	

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Method And Apparatus For Characterizing The Quality Of A Network Path

(Title of the Invention)

the specification of which

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY)

02/27/2002

as United States Application Number or PCT International

Application Number 10/070,338 and was amended on (MM/DD/YYYY) ☐ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto:

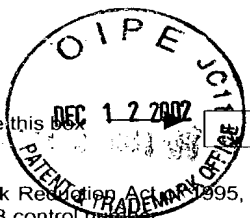
I hereby claim the benefit under 35 U.S.C. 119(h) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

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DECLARATION

 ADDITIONAL INVENTOR(S)
 Supplemental Sheet
 Page 2 of 2

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Herbert S.				Madden Madan			
Inventor's Signature		<i>Herbert S. Madden</i>		Date			
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Post Office Address							
City		Tiburon		State		CA	
		ZIP		94920		Country	
		US					
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
James G.				McGuire			
Inventor's Signature		<i>James G. McGuire</i>		Date		11/25/02	
City		San Francisco <i>CA</i>		State		CA	
		Country		US		Citizenship	
		US					
Post Office Address		2312 Gough Street, San Francisco, CA 94019					
Post Office Address							
City		San Francisco		State		CA	
		ZIP		94019		Country	
		US					
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature				Date			
City				State		Country	
						Citizenship	
Post Office Address							
Post Office Address							
City				State		ZIP	
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